

FORM 4695 (REV. 11-2003

	DLN
3)	

KNOW ALL MEN BY THESE PRESENTS:								
That I						licensed for		
Please check appropriate	Cigarette Wholesaler		ler	Other Tobacco Products				
of County, State of								
as principal, am held and	firmly bound unto the Departm	ent of Rever	nue of the State	e of Missouri, h	nereinafter known a	s the obligee, in the		
penal sum of DOLLAR				), lawful money of the United States				
as evidenced by the attached Cashier's Check or Money Order, which shall be in the safe keeping of the obligee.								
Missouri Cigarette Tax ar  If the principal has comp penalties due and owing	for, or has obtained a cigarette ad/or Other Tobacco Products To lied with all the provisions of the thing, then the Director of Revenue ount to the taxpayer. If the taxe liability.	ax Law and and and and and reques	all amendment ny amendmen est of the taxp	ts lawfully made ats, and, in par payer, at the di	e. ticular, has paid all iscontinuance of th	taxes, interest and e licensing require-		
SIGNATURE OF PRINCIPAL			BY (NAME AND TIT	LE)				
NOTARY PUBLIC								
IN TESTIMONY WHEREOF, NOTARY PUBLIC	I have thereunto set my hand and a	affixed the office		fice. COUNTY (OR CITY C	DE ST. LOUIS)			
EMBOSSER SEAL	STATE			COUNTY (OR CITY C	or 31. LOUIS)			
	SUBSCRIBED AND SWORN BEFORE ME, T	-nic						
	SUBSCRIBED AIND SWORN BEFORE ME, THIS			USE RUBBER STAMP IN CLEAR AREA BELOW				
	DA' NOTARY PUBLIC SIGNATURE	Y OF	19					
	NOTART FUBLIC SIGNATURE	MY COMMISSIC	ON EAFIRES					
	NOTARY PUBLIC NAME (TYPED OR PRINT	(FD)						
	THE ON PRINT	,						
				->				